

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		6-12-00
O.I.P.E. CLASSIFIER		49	6-19-00
FORMALITY REVIEW		67503	8-15-00
RESPONSE FORMALITY REVIEW		67503	9-20-00

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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